24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	FOR SE OF FORM 24/48		
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼		
Future45			
	C C00574533		
Check if 24-hour report	on 09 / 25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Full Name of Payee Del Cielo Media	Date of Public Distribution/Dissemination		
	09 / 23 / 2016		
Mailing Address 1427 Leslie Avenue	Amount		
Suite 102	775000 00		
City State Zip Code Alexandria VA 22301	775000.00 Transaction ID : 001		
Purpose of Expenditure Media placement Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Name of Federal Candidate	e Sought: House District:		
Clinton Hillony			
	President Senate State: ursement For: Primary X General		
Per Election for Office Sought 935560.52 2016	Other (specify)		
Full Name of Payee Connell Donatelli	Date of Public Distribution/Dissemination		
	09 23 2016		
Mailing Address P.O. Box 1877	Amount		
City State Zip Code	321884.76		
Alexandria VA 22313	Transaction ID: 002 Date of Disbursement or Obligation		
Purpose of Expenditure Media placement Category/ Type O04	09 22 / 2016		
Type	33 22 2310		
Clinton Hillony	e Sought: House District:		
Clinton, Filliary, , ,	President Senate State:		
Calendar Year-To-Date Per Election for Office Sought Disbu 2016	ursement For: Primary General Other (specify)		
(a) SUBTOTAL of Itemized Independent Expenditures	400000470		
(a) SOBIOTAL OF REMIZED INDEPENDENT EXPENDITURES	1096884.76		
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.			
Wojciechowski, Maria, , , [Electronically Filed] Date 1	0 15 2016		
Signature			

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	LINDLINI EXPLINDI	ITONES		PAGE 2 OF 2 FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)			FEC ID	DENTIFICATION NUMBER ▼	
Future45			C	C00574533	
Check if 24-hour report × 48-hour r	report New report	ort X Amends repo	ort filed on 09	25 / 2016	
Full Name of Payee			Date of Public	c Distribution/Dissemination	
DDC			09	23 2016	
Mailing Address 805 15th Street, NW			Amount		
Suite 300					
City	State	Zip Code		97499.00	
Washington	DC	20005		Transaction ID: 003 Date of Disbursement or Obligation	
Purpose of Expenditure Media placement		Category/ Type 004	09	23 / 2016	
Name of Federal Candidate		Support	Office Sought:	House District:	
Clinton, Hillary, , ,		X Oppose	✗ President	Senate State:	
Calendar Year-To-Date Per Election for Office Sought		1354944.28	Disbursement For: 2016 Other (sp	Primary Seneral	
Full Name of Payee	, , , ,				
McCarthy Hennings Whalen			Date of Public	c Distribution/Dissemination	
Mailing Address 1850 M Street NW			Amount		
Suite 235			Amount		
City	State	Zip Code		25904.49	
Washington	DC	20036	Transaction II Date of Disbu	D: 004 ursement or Obligation	
Purpose of Expenditure Media production		Category/ Type 004	09	24 / 2016	
Name of Federal Candidate		Support	Office Sought:	House District:	
Clinton, Hillary, , ,		x Oppose	x President	Senate State:	
Calendar Year-To-Date Per Election for Office Sought		1380848.77	Disbursement For: 2016 Other (sp	Primary General	
			Outlet (3)		
(a) SUBTOTAL of Itemized Independent E	Expenditures		>	123403.49	
(b) SUBTOTAL of Unitemized Independent Expenditures					
(c) TOTAL Independent Expenditures			•	1220288.25	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Wojciechowski, Maria, , ,	[Electron	ically Filed] Date	10 / 15	2016	
(c) TOTAL Independent Expenditures Under penalty of perjury I certify that the with, or at the request or suggestion of, a party committee) any political party comm	independent expenditures ny candidate or authorized ittee or its agent.	reported herein were committee or agent of	not made in cooperat	tion, consultation, or co orting entity is not a po	